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Request	Application Number	10/583 BAA	ATRAL FAX CENTER		
For	Filing Date	June 22, 2006	NOV 2 0 2009		
Continued Examination (RCE) Transmittal	First Named Inventor	Philippe Le Roy et al.	THUY Z U ZUUS		
Address to:	Art Unit	2629	¥:		
Mail Stop RCE Commissioner for Patents P.O. Box 1450	Examiner Name	Yong H. Sim			
Alexandria, VA 22313-1450	Attorney Docket Number	PF030184	ブーボ		
This is a Request for Continued Examination (RCE) under 37 CFR Request for Continued Examination (RCE) practice under 37 CFR 1. June 8, 1995, or to any design application. See Instruction Sheet for Submission required under 37 C.F.R. 1.114 Note: I	114 does not apoly to any utili	ty or plant application filed prior the USPTO) on page 2.	to		
amendments and amendments enclosed with the RCE will be enti- instructs otherwise. If applicant does not wish to have any previou request non-entry of such amendment(s).	ared in the order in which they	were filed unless applicant			
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ll. ☐ Other b ☑ Enclosed					
i. ⊠ Amendment/Reply III.	☐ Information Disclosure S	lalement (IDS)			
2. (Miscellaneous)			i,		
a. Suspension of action on the above-identified applicat a period ofmonths. (Period of suspension shall no	ion is requested under 37 C.F Nexceed 3 months; Fee under 37	.R. 1.103(c) for C.F.R. 1.17(i) required)			
b. Other  3. Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.	F.R. 1.114 when the RCE is filed.				
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Name (Print /Type) Patricia A. Verlangleri	Registration No. (Attorney)	(Agent) 42,201			
Signature afreich. Unlung		20, 2009	<u> </u>		
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Request	Application Number	10/583,844	HRCEIVED.
For	Filing Date	Lima 22 2006	TRAL FAX CENTER NOV 2 0 2009
Continued Examination (RCE)  Transmittal	First Named Inventor	Philippe Le Roy et al.	1401 5 6 5000
Address to:	Art Unit	2629	. j.
Mail Stop RCE Commissioner for Patents P.O. Box 1450	Examinar Name	Yong H. Sim	: ; ;
Alexandria, VA 22313-1450	Attorney Docket Number	PF030184	フニ
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b A Enclosed I. Amendment/Reply iii	i. Information Disclosure S	tatement (IDS)	
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c. Payment by credit card (Form PTO-2038 enclosed) WARNING: Information on this form may become be included on this form. Provide credit card in			
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Neme (Print /Type) Patricla A. Verlangleri	Registration No. (Attorney/		
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Name (Print /Type) Patricia A. Verlangleri			,
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